PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

CUSTOMER NUMBER 22850 o: Maii Maii Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the INSUE FHI and PUBLICATION FEE (if required). Blocks I through, 5 should be completed where appropriate. All further correspondence including the Publica, divasce order and notification of maintenance fee new till be mailed to remerate correspondence address as indicated tuless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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22850 7590 03/14/2008

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(Signature)
(Date)

 APPLICATION NO.
 FILING DATE
 FIRST NAMED INVENTOR
 ATTORNEY DOCKET NO.
 CONFIRMATION NO.

 10:567.333
 02:0662006
 Vladimir Gutalj
 28:483GUS6PCT
 4988

TITLE OF INVENTION: THREE-POSITION GROUND SWITCH

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
AFER TIFE	SMALLERITII	1330ETEE DOE	FOREICATION FEE DOE	PREV. PAID 1330E FEE	TOTAL PEB(8) DOE	DATEDOE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	06/16/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
FRIEDHOFER, MICHAEL A 28		2832	200-400000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.55a). ☐ Change of correspondence address (or Change of Correspondence Address form FTOS/B1/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form FTOS/B47: Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered nationey or agens) and the names of up to 2 registered patent attorneys or agents. If no name is insted, no name will be printed.		era 2 McClel	Oblon, Spivak, McClelland, Maier Neustadt, P.C.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

(e) and the contract of the co

AREVA T&D SA Paris, FRANCE

Please check the appropriate assignee category or categories (will not	be printed on the patent):	Individual	Corporation or other private group entity	Government
4a. The following fee(s) are submitted:	4b. Payment of Fee(s):	Please first rea	pply any previously paid issue fee shown ab	oove)

☑ Issue Fee ☐ A check is enclosed. ☑ Publication Fee (No small entity discount permitted) ☑ Payment by credit cs

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Advance Order - # of Copies ___ - 2 -

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Paul J. Killos Date
Typed or printed name Paul J. Killos Registration

Date _____ JUN 0 2 2008

Registration No. ____ Registration No. 58,014

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